Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 10603 947 Effective January 1, 2003 CLAIMS AS FILED - PART I OTHER THAN SMALL ENTITY OR SMALL ENTITY TYPE [(Column 1) (Coturn 2) TOTAL CLAIMS RATE FEE FEE 750.00 375.00 MATER EXTRA MANGER FLED OF 200 X\$19-TOTAL CHARGEABLE CLAIMS minus 20a X\$ 9-**OB** 42 NO PERCENT CLANS minus 3 = **X24**= X42-MULTIPLE DEPONDENT CLAIM PRESENT +140= +280-OΒ * If the difference in column 1 is less than zero, enter "O" in column 2 TOTAL TOTAL 606 OR OTHER THAN CLAIMS AS AMENDED - PART 11 OR SMALL ENTITY SMALL ENTITY (Cohumn 3) (Column 2) ग्राम्बर वर्षे ADDI-MARBER PRESENT ALGENDMENT A REMADORS TIONAL RATE TIONAL RATE PREVIOUSLY EXTRA ATER FEE FEE PAID FOR X\$18= **239**hame OR X42= X84= OR PRIST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +290-+140- 11.57 Joh ABOIL FEE ADDIT FEE (Column 2) (Cotumn 3) (Cohann 1) ADDI-SUMBER PREVIOUSLY PRESENT REMUDIS TIONAL TIONAL RATE RATE EXTRA AFTER FEE FEE DOVENT X\$18-**X3.9**0 Mos OR -X34= ******* бя FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM. +280-+140-COUNTY. ADOIT, FEE ACCIT, FEE (Cotumn 1) (Column 2) (Column 5) 20 80 ADOS-2 T 17 T MADER RATE TIONAL RATE PREVIOUSLY ECTRA FEE MENDAGENT أحدكا XXIR-Total X\$ 9-OR 104-X42n. FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +290= +140-OR If the entry is extens 1 is less than the entry is unknown 2, write "0" is extens 5.
 If the "Highest Humber Previously Padd For" bit Thits STACE is less than then 50, enter "30."
 If the "Highest Humber Previously Padd For" bit Thits STACE is less than 3, enter "3."
 The "Highest Humber Previously Padd For" (Estal or independent) is the highest number TOTAL OR ADDIT FEE or licensi in the appropriate box in column 1.

FORM PTO-425 Glas 12000 "

Person and Vindermals Colon, U.S. DEPARTMENT OF COLONIAR

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS								RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			minus 20=		•			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			mlnus 3 =		•			X43=		lor.	X86=	
MULTIPLE DEPENDENT CLAIM PE			RESENT				}	4145.			10e0a	
	 (the difference	in column 1 is	less than zero, enter		*0* in 0	column 2				; :;	TOTAL	:
* If the difference in column 1 is less than zero, enter "0" in co						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		TOTAL		JON	'	251611
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Γ	T	(Column 1)	T	HIGH		T	Г		ADDI-) !		ADDI-
<u> </u>	St27/06	REMAINING AFTER		PREVIO	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
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14	FIRST PRESE	NTATION OF M	JLTIPLE DE	PENDENT	CLAIM		180			340	4 7	
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	(Column 1) (Column 2) (Column 3)											
10		CLAIMS REMAINING AFTER		HIGHE NUMB PREVIO	ER -	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
	[AMENDMENT		PAID F			-		FEE			_FEE_
AMENDMENT	Total		Minus	**		=.		X\$ 9=		OR	X\$16=	
ME	Independent	*	Minus	444	-	=		X43= .	·	OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM			+145=	٠.	OR	+290=	
	•				•		Ļ	TOTAL		OR	TOTAL ADDIT, FEE	
			•				A	DDIT, FEE L			AQDIC 7 226	
	,	(Column 1)	· · · · · · · · · · · ·	. (Colum HIGHE		(Column 3)			100/	ſ	 -	· ADDI-
AMENOMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUMB PREVIO	ER : USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE
	Total		Minus			=		X\$ 9=	:	OR	X\$18=	
MEN	Indep ndent	•	Minus	4+4		= '		X43=		OR	=63X	
₹.	FIRST PRESE	ILTIPLE DEF	TIPLE DEPENDENT CLAIM			· -			νņ.]			
								+145=	· 	OR	+290=	·
* If the entry in column 1 is less than the entry in column 2, write 10 in column 3. **If the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter 120. **ADDIT. FEE **OPE 11 in the Previously Paid For IN THIS SPACE is less than 3, enter 13.												

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